

ENTRY FORM

Driver Name:	
Address:	
Phone:	
E-Mail:	
AEF #:	
ACDA Chapter:	

Horse(s) Name(s):	
Breed:	
Height:	
Age:	

Groom Name: (if applicable)	
Address:	
Phone:	
E-Mail:	
AEF #:	

Classes Entered: (please circle) You will be placed in the appropriate division (A, B, or C) depending on the indicated height of your equine(s).

Saturday 1 2 3 4 5 **Dressage** Training or Prelim. (please circle)
 Sunday 6 7 8 9 10 11 12

Entry deadline June 30, 2017. NO POST ENTRIES. Please make cheques payable to "Chinook Carriage Driving Club," and submit one form per driver.

MAIL TO: Geri McNeil 2511 Hwy. 587 Red Deer County, AB T0M 0K0

FEES: Adult ACDA members - \$40 Adult Non-member - \$75 Junior (under 18) - \$20

Permission for Minor to Show:

I hereby consent to the entry of my child, _____, in this equine event and certify that I have read the rules and regulations pertaining to this event, and accept responsibility for the participant of said minor.

Parent/Guardian: _____ Date: _____